

Laboratory Results

Results for the samples and analytes requested

The lab is not directly responsible for the integrity of the sample before receipt at the lab and is responsible only for the certified tests

Lab No.: 7088736001

Client Sample ID.: BLENDED EFF

Sample Information:

Type: Drinking Water
Origin: Distribution
Routine

www.pag

TEL: (631) 694-3040 FAX: (631) 420-8436

www.pacelabs.com

Hampton Bays Water District

P.O. Box 1013

Hampton Bays, NY 11946

Attn To: Rob King Federal ID: 5103704

Collected: 05/08/2019 10:10 AM Point Received: 05/08/2019 05:00 PM Location

Collected By CLIENT

Analytical Method: Field N	Method						
Parameter(s)	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	Analyzed:	Container:
Field Residual Chlorine	1.25	N3	1	mg/L	4	05/08/2019 10:10	001 SP5T1/1
Analytical Method:SM22	9223B Colilert	Prep Method:	SM22 92	223B Colilert	Prep Date	∴ 05/08/2019 8:15 PM	
Parameter(s)	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	Analyzed:	Container:
E.coli	Absent		1		Absent	05/09/2019 2:15 PM	001 SP5T1/1
Total Coliforms	Absent		1		Absent	05/09/2019 2:15 PM	001 SP5T1/1

Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range

U - Indicates the compound was analyzed for, but not detected See qualifiers page for additional qualifier definitions.

Result(s) reported meet(s) NYS Regulatory Limit(s).
Result(s) flagged with * Exceed NYS Regulatory Limit(s). Limit Noted.



Stu Murrel

Test results meet the requirements of NELAC unless otherwise noted.

This report shall not be reproduced except in full, without the written approval of the laboratory.



WorkOrder:

7088736

Laboratory Certifications

Long Island Certification IDs

575 Broad Hollow Rd, Melville, NY 11747

New York Certification #: 10478 Primary Accrediting Body

New Jersey Certification #: NY158 Pennsylvania Certification #: 68-00350 Connecticut Certification #: PH-0435 Maryland Certification #: 208

Rhode Island Certification #: LAO00340 Massachusetts Certification #: M-NY026 New Hampshire Certification #: 2987

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<u>WorkOrder :</u> 7088736

Qualifiers

N3 - Accreditation is not offered by the relevant laboratory accrediting body for this parameter.

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Sample Request Form PUBLIC WATER SUPPLIFR

Date:

Accepted By: Collected By:

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0
8
W
Temp
Cooler

Name or Code: HAMPTON BAYS WATER DISTRICT
PO. BOX 1013
Address: HAMPTON BAYS, NEW YORK 11946
(631) 728 0179

Proj. # or (Name):_

Phone #:

Attn:_

Sample Info:

Copies To: _

Bill To:

BLOWOFF	Can't Run
WELL OFF LINE 4-1 4-2	2-2 005 Bartraus
N.	\

	•
Mel Jellig.	

MI WELL OFF LINE 4-1 4-2 Buch	2-2 005. (Without Bant pu	#9 ☐ WELL RUN TO SYSTEM		AYES ONO VOC'S PRESERVED WITH HCI	
1/2	`	18	100	0	アルバン
AIER SUPPLIER	5-8-19	Booth	1 Chimmel	2.6°C	

Sample Types	Purpose	Origin	Tre
PW - Potable Water	RO - Routine	D - Distribution	AST
GW - Groundwater	RE - Resample	RW - Raw Well	GAC
SW - Surface Water	S - Special	TW - Treated Well	z
WW - Waste Water		T - Tank	H
AQ - Aqueous		MW - Monitoring Well	
lios o		l - Influent)
500		E - Effluent	

- Granular Activated Charcoal - Nitrate Removal Plant - Iron Removal Plant

- Other

atment Types - Air Stripper

	1	Т		1	T-		1	T	1	7	7	-	
Lab No.					70	5	V.00	1					
Analysis	ROT DOC, NA PEC NADL	BECT PAC. NIN PEC MANG	BOOT BOC. NIN. PTC. MODIC	BOT BC. NIN PER MANC	Born Pro Ally Pto mass	Bet, Pec	Ber Poc.	Born Por.	Part Por	Rept Pro	Ber Br.	Ber, Poc	Back Por.
Field Readings					7.36								
Field					.25								
Purpose	3	B	જી	ð	3	3	9	3	9	S	8	2	3
Treatment Type									8				
Origin	RW	RW	Red	3	<u></u>	RW	RW	RW	RW	RW	(Pa	B	E E
Location	WELL 1-1	NEU 1-2	WELL 1-3	BLEND, INNE	BLEND EFF	WELL 2-1	WELL 2-2	WELL 3-1	Wer 3.0	WELL 8-3	1-5 Tam	Wal 4-1	WELL 4-3
Sample Type	6W	9	6W	GW)	PW	GW)	99	GW	9	Sw	GW	GW	SW /
Date/Time Collected:	3116 4 of 5	9:30	5-8-19	9.55	5-8-19	8.8-10	5-8-19		5-8-19		7:35	S-8-19	5-8-19

Sample Condition Upon Receipt WO#:7088736 Client Name: Due Date: 06/07/19 CLIENT: HBW Courier: Fed Ex UPS USPS Client Commercial Pace Other No Seals intact: Yes No Temperature Blank Present: Yes No Custody Seal on Cooler/Box Present: Yes Packing Material: Bubble Wrap Bubble Bags Ziploc None Dther Type of Ice: Wet Blue None Thermometer Used: TH091 Samples on ice, cooling process has begun **Correction Factor:** Cooler Temperature Corrected (°C): Date/Time 5035A kits placed in freezer Cooler Temperature (°C): Temp should be above freezing to 6.0°C Date and Initials of person examining contents USDA Regulated Soil (N/A, water sample) Did samples orignate from a foreign source (internationally Did samples originate in a quarantine zone within the United States: AL, AR, CA, FL, GA, ID, LA, MS, NC, including Hawaii and Puerto Rico)? Yes No NM, NY, OK, OR, SC, TN, TX, or VA (check map)? YES NO If Yes to either question, fill out a Regulated Soil Checklist (F-LI-C-010) and include with SCUR/COC paperwork. COMMENTS: Yes □No Chain of Custody Present: Yes □No Chain of Custody Filled Out: Yes ПNо Chain of Custody Relinquished: Sampler Name & Signature on COC Yes □No □N/A Yes □No Samples Arrived within Hold Time: Yes Short Hold Time Analysis (<72hr): ПNO □No □Yes Rush Turn Around Time Requested: Sufficient Volume: (Triple volume provided for MS/MSD DYes □No TYes 9 Correct Containers Used: □No Yes -Pace Containers Used: □No □Yes 10. □N₀ Containers Intact: N/A 11. Filtered volume received for Dissolved tests □Yes □No Note if sediment is visible in the dissolved container. 12. Sample Labels match COC: Yes □No Matrix SL WT OIL -Includes date/time/ID/Analysis All containers needing preservation have been checked □N/A 13. ☐ HNO₃ ☐ H₂SO₄ П NаОН ПМо ☐ HCI pH paper Lot # Sample # All containers needing preservation are found to be in compliance with EPA recommendation? DNA □Yes DNo (HNO₃, H₂SO₄, HCl, NaOH>9 Sultide, NAOH>12 Cyanide) Exceptions: VOA, Coliform, TOC/DOC, Oil and Grease, Initial when completed: Lot # of added preservative: Date/Time preservative added DRO/8015 (water). Per Method, VOA pH is checked after analysis ПYes □No □M/A Samples checked for dechlorination: KI starch test strips Lot # Positive for Res. Chlorine? Y N Residual chlorine strips Lot # N/A □No □Yes Headspace in VOA Vials (>6mm): 16. □N/A

Field Data Required? Y / N Client Notification/ Resolution: Person Contacted: Date/Time: Comments/ Resolution:

EN/A

Trip Blank Present:

Trip Blank Custody Seals Present

Pace Trip Blank Lot # (if applicable):

□Yes

□Yes

€ No

□No